Eastern MRS Meeting Notes September 30th, 2008 Onslow County DSS

Counties Present: Bladen, Brunswick, Carteret, Craven, Onslow, Pitt, Wayne.

Introductions
Announcements – from Raleigh, from you?
In Home Services Discussion
Fact Sheets
Group Care – Children 6 and under
Appla

<u>Announcements</u>

- DCD letters that have come out recently remember we are sending these all out on the same day now (come out on the 15th and 30th).
- System of Care Conference in December.
- Some restructuring within the Division. Work First has some new Federal
 challenges facing them and needed to focus in a new way, therefore Work
 First is moving to a separate section. CPS and Foster Care policy will be
 combining as a team so that all child welfare policy will be on the same team.
 There will be more information coming out regarding this transition as it
 moves along. Technically this goes into effect October 1, but will take some
 time to be fully implemented.

<u>In-Home Services – Improvement Project (Prevent Child Abuse NC)</u>
Prevent Child Abuse, Anne Sayers led a discussion at the Central and Western meetings. Will be here to have similar discussion next month.

Overview of project and Purpose of the Discussion

NC's recent federal review brought to light an insufficient service array, particularly during in-home services. We want to address this and have entered into a contract with PCA to: 1) examine the provision and effectiveness of in-home services within county DSS and the availability of needed community based services, 2) make recommendations regarding the policy and/or service changes, and 3) develop a capacity building proposal for consideration to test strategies to increase the effectiveness of CPS in-home services and prevention by selected county DSSs. PCA is reviewing the research literature, and asking counties here, and will bring all this information together and write a report including recommendations and will bring this to Duke endowment. Interested in how evidence based interventions can have an impact on this population.

Fact Sheets

Nicole was here to talk about the overall evaluation and fact sheets. These went out at the end of August.

Overall Evaluation Update

- This year is not very heavy on data collection, mostly compiling data collected from the last 2 years and doing analysis will produce a large report at the end of the year.
- This year they are doing CFT observations using a tool from Washington State this was discussed more in depth at an earlier meeting. Thought it would help take the evaluation to the next level. So far Duke has done broad data collections, phone interviews, focus groups, etc.
- Did the first CFT observation using this tool last night. Hoping that this will give them a sense of how folks are implementing CFTs around the state. Can help the Division develop policy as well as training.
- Counties can use this tool to evaluate their own CFTs can be used as a teaching and supervisory tool to help workers improve their own CFTs.

Fact Sheets

- Each of the 100 counties received a fact sheet this year. All fact sheets are on-line in the MRS section of the website.
- They provide various county specific information and also comparisons to similar counties.
- Nicole would like feedback from counties on what you might like to see on the
 fact sheets next year. For example, we switched the evaluation period to
 fiscal year from calendar year with these facts sheets. People in a previous
 meeting also suggested that where individual counties were compared to their
 comparison groups, also have a column for the state average.
- Acknowledged that the contributory factors chart is confusing and hard to read and that it will be changed in some way for the next round of sheets.
- One county would like to see some connection between the instances of military locations/combat stress and child maltreatment.
 - UNC has a grant from the federal government called the Citizens Solders Support Program. Trying to create a system of best practice to develop tools around working with this population around not only child welfare but domestic violence.
 - A check box for military or not on the 5104 is a start, however need to determine what exactly we are wanting to get out of this, for example, need info on deployment, etc. May want to have this as a topic at a MRS meeting. Need to tease out what we would want to accomplish before we just start adding stuff on the 5104.
 - We will try to gather more information and have it as a starting point at a future meeting.

Group Care – Children 6 and Under (as well as 12 and under)

This was another area that was mentioned by the Federal government during our review.

 How many people feel like you have children in group care due to particular behaviors or because there are not the appropriate services in your county?

- One county has very young children with sexualized behaviors that cannot be treated in the community. There is no group home in their community either.
- Children who are extremely aggressive as well. Some of these are the same children who are sexualized. They have tried them in therapeutic care and one child caused \$3,000 of damage to the home before being moved to group care.
- Insurance is an issue. Dad had insurance but could not find a facility in NC that could provide the services and accept the insurance, this child had to be placed in Virginia.
- How can we plug this hole in service?
 - Suggestion of a specialized form of licensure for these types of children (highly aggressive and/or sexualized). Not all therapeutic foster parents are willing to take these type of children. Have to have a placement where the foster parents do not have their own children or pets that would be at risk. This was from a worker who is also a licensed therapeutic foster parent.
 - Sometimes the child just needs a placement where they are the only child, which is hard to do with the number of foster parents we currently have available.
- Any suggestions on how to make these changes?
 - o Bladen is looking at outreach by looking to see where the children originally came from and going to those communities and asking the communities if they realize that this percentage of children in foster care in Bladen came from your community? This catches the attention of the community and allows them to do some prevention in these areas and also try and recruit foster parents from that area. (They are also doing the same thing with the number of reports from each area.) Gives them a chance to talk to the mayors and other key community figures in these towns. They are just starting this because the mapping is taking some time, but that is their plan. Hope to expand this to DJJ children as well.
- If you are not placing kids under 12 or 6 in group care, how have you avoided having to do this? What has worked? Something must be working because there are some counties that have very low numbers or no children in group care.
 - Believe that the therapeutic foster parent system works, having families that have more education and training, and are providing more intensive services, but there are issues with shortages of these types of foster parents.
 - Sometimes there is no other choice but to place a child in roup care. If they are dangerously aggressive, they need to be institutionalized at least temporarily, but often, by the time the aggression is under control the child has been mentally institutionalized. How do we balance this?

- Believe there needs to be a tier system of therapeutic foster parents.
 Some foster parents are more capable of dealing with the more extreme children.
- Also needs to be a rapid response crisis team so that when things begin to escalate, there is someone to call and the community can "circle the wagons" before the child ended up having to be removed.
- If the foster parents were more extensively trained, would they be compensated for the highest level they were trained for, or based on the level of child they were currently keeping?
- Need to start buying in to counties helping each other. Don't be afraid to cross county lines to keep a child in a family foster home.
- Not just an issue of the available therapeutic foster parents also need the services and therapists available to treat the issues. Otherwise, the foster parent is just managing the behavior, and as soon as that parent stops managing it, the behavior will resurface. Some counties just don't have these services in place to treat the issues even if they have the therapeutic foster parents to manage the children.
- A true child and family team for this particular child, not a generic one, but one that is tuned in to this child, that includes persons from multiple agencies, helps to deal with issues before they blow up. (This can serve as the rapid response crisis team mentioned earlier, and even prevent some crisis from emerging full blown by attending to it as it begins to emerge, rather than waiting until it is a full crisis.)
 - Illinois had a crisis response team. They have someone that would respond within an hour when you get the call that says "take this child now".
- Question was asked about the treatment for adult violent and sexual offenders, the treatment is often group treatment. Has there been any research on treating children this way? If the group home placement is temporary and purposeful, then it can be beneficial for the child.
- The most important thing is that children are placed in the most appropriate placement and receive the treatment that is most beneficial. While we don't want to place them in group care because there is no place else to put them. but, if there is group care that is licensed for mental health issues, then it may be the best placement for the child. We need to be careful to distinguish between the two and make sure that we don't place kids in group homes just for convenience, but also don't pass over a group home placement when it may be in the best interest of the individual child.
 - o If they are a Level 3 group home, they are supposed to have a licensed professional that goes in a certain amount of time. However, all services are all supposed to come from that facility, so they don't get the community piece, and the parents may not be learning how to deal with the child.
 - Bladen has started using Intensive In Home Mental Health services once the child has gone back into the home. These are working well for them.

- Concerns with these services are that there are not a lot of them, and not all of them are quality programs.
- Concerns about how some rules get in the way of finding the right placement. A therapeutic foster home is only supposed to have 2 children, so what happens when you have a sibling group of more than 2?
 - Also, if a child becomes 'at home' in a particular foster home? If this is a higher level of foster home, due to cost issues, we will move them to a new home that is a lower cost when the children appear to "get better". If a child feels comfortable in a particular home, and wants to stay there, they may act out just to stay there. If they respond favorably to treatment, they then get moved again to another home. Feels like we are punishing the child for getting better by moving them from a familiar home where they have established a relationship.
- Is this something that we can put out to the community and get their help? The state can work on this as well, but the nitty gritty will be done in the community. How do we get people in the community to be willing to take the kids that are not the 'cute cuddly ones'?
 - This is a whole separate issue, we tend to focus on the really young ones, but some folks felt like the teenagers sitting in care, are more of an issue.
 - Recruitment and retention project asked a lot of questions about foster parents and what they needed. Foster parents did not feel that they had the training and were unable to keep children that were acting out above a certain level. Thought money would be the biggest issue for foster parents, but it was not – lack of training was. There are many times they want to keep the children that are placed with them, but they do not feel that they have the capacity, knowledge, and education to do that.
 - Some counties have more resources (Foster Parent Association, etc.)
 than others. Are there some things that the communities can provide to support these foster parents?
 - Counties have problems getting foster parents to come to the training.
 Many foster parents don't believe that they will get anything out of the training.
- The public image of foster care is still that foster care harms children. The
 public has a distorted image of what foster care is, and may approach DSS
 with their own motives (only want to adopt, etc.).
 - We as the agency really need to take a step back and try to change the public image of foster care. We need to be very clear with potential foster parents about the expectations and then spend quality time with these folks so that we can keep them. We don't intentionally give them the short end of the stick, its just the reality of the system where social workers are overworked.
 - Need to let people know that foster care is a service they will be providing.

- November 3rd Jordan Institute has a webinar regarding foster care recruitment and retention.
- Especially in the faith based community, there are a lot of people that would like to provide this service, but these parents need to have a lot of information up front, expectations, and the reality of foster care.
 Letting potential foster parents hear from current foster parents and how they handled a negative situation with a foster child in the past, and the fact that they made it through that crisis is a good idea.
- Talk to people you know in your community whenever you have a chance. Have one of your current foster parents come talk to your Sunday School class or something. Other 'outside the box' ideas in your community.
- Licensing placement limits are an issue. If you have a sibling group with more than 5, you would have to ask for special permission to place them in a foster home that may be perfectly willing to take them.
 - May end up placing them in a group home so that they can all be together – however, are they really together? If they are not in the same cottage, they are not really all together.
 - Worker said even if they are not in the same cottage they may see each other daily at and least on the weekends, whereas they have trouble getting some family foster homes to buy into sibling visits.
 - Sibling visits with children in different homes should not be negotiable.
 If it is a clear expectation and we do not place children if they do not participate in these, then it will become a norm.
- One person here used to work for Youth Homes. One year they had the luxury of being able to do a TV commercial and they targeted older teenagers. The commercial worked wonders for recruitment for foster parents for teenagers. She suggested that if anyone had any extra money or could work with local TV stations to try this.
- Buncombe county did a recruitment video with foster parents that was loosely based on the social worker recruitment video and it was very well received.
 Because it had real foster parents and children in it telling 'how it was'.
- Use something like this and get actual foster parents to talk about their experiences.

October Meetings:

Central: Cabarrus October 29th Western: AB Tech October 14th Eastern: Halifax October 16th

November Meetings:

Eastern: Dare (Manteo) Nov 13th